Psychology Fellowship Program



VA Caribbean Healthcare System
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10 Calle Casia San Juan, PR 00921-3201 (800) 449-8729 http://www.caribbean.va.gov/

Applications due: January 11, 2021

Accreditation Status

The postdoctoral fellowship at the **VA Caribbean Healthcare System** is fully accredited by the Commission on Accreditation (CoA) of the American Psychological Association (APA). Our reaccreditation site visit was scheduled for March 2020, but was cancelled by the APA and the VA Office of Academic Affiliations due to the Covid-19 pandemic. As informed by the APA, our program remains in fully accredited status. Reaccreditation site visits are expected to restart in 2021.

Office of Program Consultation and Accreditation American Psychological Association 750 First St, NE, Washington, DC 20002-4242 Phone: (202) 336-5979 / Email: apaaccred@apa.org

Web: https://www.apa.org/ed/accreditation/index

Pandemic Contingencies:

At the time of this publication, Psychology Interns and Fellows are teleworking and performing telehealth services almost exclusively due to the COVID-19 pandemic. Supervision meetings and training seminars are being done through virtual platforms. This will be reviewed again in October 2020 by our center's administrators. When the go ahead to report back to work on-site is made, it will be done in stages to limit the amount of employees, trainees, patients, and visitors in the center at the same time. At the present time, based on administrators indications, we may expect to work on a hybrid format (some days on-site, other days teleworking) once the System starts to reopen. We expect to be able to provide ample on-site training experiences, but clearly, this will depend on how the pandemic unfolds and decisions made by top VA Caribbean officials. We will have more information about these issues when the time comes to have interviews in February. We are open to conducting interviews through video meetings platforms.

Application & Selection Procedures

Eligibility Requirements:

- Completion of an American Psychological Association (APA) or Canadian Psychological Association (CPA) accredited graduate program in Clinical, Counseling, or Combined Psychology or a program accredited in Clinical Science by the Psychological Clinical Science Accreditation System (PCSAS)
- 2. Completion of an APA or CPA-accredited psychology internship program.
- 3. United States citizenship at the time of the application to the program. Health Professions Trainees who receive a direct stipend (pay) must be U.S. citizens.

This document may contain links to sites external to Department of Veterans Affairs. VA does not endorse and is not responsible for the content of the external linked websites.

- 4. **U.S. Social Security Number.** All VA appointees must have a U.S. social security number (SSN) prior to beginning the pre-employment, on-boarding process at the Department of Veterans Affairs.
- 5. Selective Service Registration. Male applicants born after 12/31/1959 must have registered for the Selective Service by age 26 to be eligible for U.S. government employment, including selection as a VA trainee. For additional information about the Selective Service System, and to register or to check your registration status visit https://www.sss.gov/. Anyone who was required to register but did not register before the age of 26 will need to apply for a Status Information Letter (SIL) and request a waiver. Waivers are rare and requests will be reviewed on a case by case basis by the VA Office of Human Resources Management. This process can take up to six months for a final determination.
- 6. Candidates must be fully bilingual in Spanish and English. Applicants must read, write, and speak both languages fluently.

Interested candidates who have not completed all requirements for their doctoral degree in clinical, counseling or combination program in psychology and who are currently completing accredited doctoral and internship programs may also apply. However, priority in selection will be given to applicants who have already completed their dissertation prior to our fellowship offer date: **February 22**, **2021**. The start date for the next Fellowship is **August 30**, **2021**. **All requirements for the doctoral degree, including dissertation and internship, must be completed prior to beginning the fellowship**. Dissertations need to be successfully defended by early August in order to allow sufficient time for official VA Caribbean staffing recruitment procedures to take place. We will request official confirmation of dissertation defense date from candidates still completing their dissertations after a fellowship offer is made.

Application Procedures

Our Postdoctoral program will use the APPA CAS (APPIC Psychology Postdoctoral Application - Centralized Application System).

Click on the following link to access the <u>APPA CAS</u> (APPIC Psychology Postdoctoral Application). Complete the demographics, educational, clinical training and other sections required of all applicants for all APPA CAS programs. Then select the appropriate programs (emphasis area/s) within the Program you are applying to. APPA CAS allows you to request letters of recommendation electronically which are then uploaded by the letter writer. APPA CAS refers to letters of recommendation as "Evaluations."

The following application requirements must be included (uploaded) in the APPA CAS for all program designations (emphasis area):

- 1. A cover letter indicating your training area of interest and your interest in working at the San Juan VA, your future professional goals and how the fellowship will contribute toward the achievement of your future professional goals.
- An autobiographical essay that helps us have a clearer idea of who you are. You could add personal and professional information that could help us to know you better. Please include in your essay the following information:
 - a. How did you become interested- personal and professional reasons- in the emphasis area that you are applying to?
 - b. Life experiences that may have contributed to developing your clinical interests.
 - c. Your motivation to develop expertise in this particular area. Include previous educational, research and clinical experience in the special emphasis area to which you are applying.
 - d. Any experience you may have working with the patient population belonging to the emphasis area you are applying to.
 - e. Experience with diverse populations, your understanding of diversity, ways in which issues of diversity influence your clinical practice.

- f. Other clinical experiences that you have had. Please detail the type of patients seen (i.e. ages, diagnoses, gender, ethnicity, race, sexual orientation, etc.), clinical services performed (i.e., individual, couples, family, group therapy, etc.), and types of supervision obtained and/or provided (i.e., individual, group, video or audio tape, live, etc.).
- g. Theoretical orientation and how this influences your way of conceptualizing cases and your method of intervention.

3. A Curriculum Vitae

- 4. A copy of your doctoral internship certificate of an APA or CPA-accredited site. If you have not completed your internship, have the Director of Training of the internship program upload a letter of good standing and expected date of completion of program. If selected for a Fellowship position, a copy of your completion certificate would be required before beginning the training year.
- 5. A copy of your doctoral degree diploma. If selected for a Fellowship position before completion of your doctoral degree, an official letter from your university will be required before beginning the training year certifying that you have met all doctoral program requirements. A copy of your diploma would be required when your degree is officially conferred.
- 6. A copy of your doctoral transcript. An official copy will be required if selected to a position.
- 7. One clinical work sample, such as a copy of a psychotherapy treatment summary without any personally identifiable information, completed under the supervision of a licensed psychologist. The document should include the course and outcome of a completed case or a current case to date and must contain the co-signature of your supervisor. You may also include a published manuscript of which you are the first author, or other scholar document that highlights your work relevant to the special emphasis area for which you are applying. You may include a de-identified psychological evaluation report. If including a psychological evaluation report, the document must contain the co-signature of your supervisor and integrate data from a clinical interview and several assessment instruments. It is preferable that the clinical work sample you submit reflects your experience in the emphasis area you are applying to.
- 8. Three letters of recommendation from supervisors or faculty who are well acquainted with you and your qualifications. Letters of recommendation from recent or current clinical supervisors are preferred. At least one letter must be from an Internship Supervisor.
- 9. Future Fellows need to take the VA Office of Academic Affiliations Mandatory Training for Trainees to be completed online. Instructions will be sent by the Training Director on how to take this training. Other online trainings may also be assigned by the Training Director prior to beginning of the training year.

All materials must be received by **January 11, 2021**. Applicants are welcomed to contact the Postdoctoral Fellowship Coordinator, Dr. Mabel Quiñones Vázquez, at (787) 641-7582, extension 112519 or the Director of Training, Dr. Rafael Cancio González, at (787) 641-7582 extension 112471.

Selection Procedures

After receipt of written materials, a select number of suitable applicants will be called to set up interviews with Fellowship faculty. We expect to conduct interviews between February 8 and 19, 2021. Interviews are conducted by two Faculty members and some may include a current Fellow. On-site interviews are preferred particularly for applicants who are not from the island so you also get some exposure to the culture, but virtual interviews are available. The interview is semi-structured and is conducted in Spanish and English (mostly in Spanish). Offers will be made by telephone on February 22, 2021 starting at 11:00am Atlantic Time (10:00am Eastern Time), as per the APPIC uniform notification date. Applicants will be allowed to hold an offer for 3 hours. Applications will be accepted until the positions are filled.

If prior to our recruiting decision you receive another fellowship or job offer lower in your preferences list, you are encouraged to contact us to inquire about your application status. We will request evidence of the existing offer. Please notify us as soon as possible if you accept an offer from another program. Applicants not selected for our program will be notified as soon as possible when positions are filled.

Applicants who accept a fellowship offer from us will be appointed as Psychology Fellows and will be identified as such to both the staff and population served. Fellows work under the same personnel regulations as Federal employees.

The Department of Veterans Affairs (VA) adheres to all Equal Employment Opportunity and Affirmative Action policies. As a Veterans Health Administration (VHA) Health Professions Trainee (HPT), you will receive a Federal appointment, and the following requirements will apply prior to that appointment.

- 1. **Fingerprint Screening and Background Investigation.** All HPTs will be fingerprinted and undergo screenings and background investigations. Additional details about the required background checks can be found at the following website: http://www.archives.gov/federal-register/codification/executive-order/10450.html.
- 2. **Drug Testing.** Per Executive Order 12564, the VA strives to be a Drug-Free Workplace. HPTs are not drug-tested prior to appointment, however are subject to random drug testing throughout the entire VA appointment period. You will be asked to sign an acknowledgement form stating you are aware of this practice. See item 5 below.
- 3. Health Requirements. HPTs need to be fit to perform the essential functions (physical and mental) of the training program and immunized following current Center for Disease Control (CDC) guidelines and VHA policy. This protects you, other employees and patients while working in a healthcare facility. Required are tuberculosis screening, Hepatitis B vaccine as well as annual influenza vaccine. Declinations are EXTREMELY rare. If you decline the flu vaccine you will be required to wear a mask while in patient care areas of the VA. Trainees at the VA Caribbean also need to show proof of having been vaccinated against Varicella (chickenpox) and at the present time trainees are also being tested for COVID-19. Proof of immunizations will be required by the Training Director to process Fellows appointments.
- 4. **Primary source verification of all prior education and training.** Training Directors will be contacting the appropriate institutions to ensure you have the appropriate qualifications and credentials as required by the admission criteria of the training program in which you are enrolled.
- 5. **Additional On-boarding Forms.** Additional pre-employment forms include the Application for Health Professions Trainees (VA 10-2850D) and the Declaration for Federal Employment (OF 306). These documents and others are available online for review at https://www.va.gov/oaa/appforms.asp. Falsifying any answer on these required Federal documents will result in the inability to appoint or immediate dismissal from the training program.
- 6. **Proof of Identity per VA.** VA on-boarding requires presentation of two source documents (IDs). Documents must be unexpired and names on both documents must match. For more information visit: https://www.oit.va.gov/programs/piv/media/docs/IDMatrix.pdf

Failure to comply with these procedures or inability to pass the above mentioned screens will deem a candidate ineligible to be appointed as a trainee in our institution. Additional information about eligibility requirements as provided by the VA Central Office is found at the end of this brochure.

Future Fellows need to be available to report personally to the VA Caribbean within the month prior to the official start date of the training year to complete paperwork related to their appointment, to conduct the background check which includes being fingerprinted, and to get the physical exam done at our Employee Health Unit. It is recommended that all future trainees set aside ample time before the Fellowship begins to complete all pre-appointment requirements. Therefore, any travel or relocation plans should take all the above requirements into consideration.

Postdoctoral Residency Admissions, Support, and Initial Placement Data

Date Program Tables are updated: October 9, 2020

Postdoctoral Program Admissions

Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program's policies on intern selection and practicum and academic preparation requirements:

The primary goal of the postdoctoral program is for Fellows to develop the full range of competencies required for independent functioning as a psychologist, including competencies in assessment, interventions, consultation and interprofessional/interdisciplinary skills, ethical and legal standards, research/scholarly inquiry, individual and cultural diversity issues, professional values, attitudes, and behaviors, communication and interpersonal skills, clinical supervision, teaching, and organization, management, and administration issues pertinent to psychological services. Our program has two possible areas of emphases applicant may apply to: Women Veterans Mental Health and Primary Care Mental Health Integration.

Describe any other required minimum criteria used to screen applicants:

Applicants must be United States citizens at the time of the application and have completed a doctoral program at an APA or CPA accredited graduate program in Clinical, Counseling, or Combined psychology or PCSAS accredited program in Clinical Science. Completion of an APA or CPA-accredited psychology internship program is also required. Additionally, applicants must be fully bilingual in Spanish and English. We assign no preferential ranking to students from Ph.D., Psy.D., Clinical or Counseling Psychology programs, or to local vs outside Puerto Rico applicants. However, a focus on attempting to match with applicants representing diverse qualities and on securing a diverse cohort of trainees will be sought. We do not set limits as to amounts of trainees we may appoint graduating from particular universities and internship programs.

Financial and Other Benefit Support for Upcoming Training Year*

Annual Stipend/Salary for Full-time Residents	\$46,222	
Annual Stipend/Salary for Half-time Residents	n/a	
Program provides access to medical insurance for trainees?	⊠ Yes □No	
If access to medical insurance is provided:		
Trainee contribution to cost required?	⊠ Yes □No	
Coverage of family member(s) available?	⊠ Yes □No	
Coverage of legally married partner available?	⊠Yes □No	
Coverage of domestic partner available?	□Yes ⊠No	
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	4 hours are accrued per pay period	
	4 hours are accrued	
Hours of Annual Paid Sick Leave	per pay period	
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	⊠Yes □No	

Other Benefits (please describe): Up to 40 hours of professional leave may be granted for conference attendance, job interviews, and licensure exam day. Free parking or available public transit subsidy benefit. For more details on VA benefits, see https://www.psychologytraining.va.gov/benefits.asp.

Initial Post-Residency Positions

(Provide an Aggregated Tally for the Preceding 3 Cohorts)

	2016-2019	
Total # of residents who were in the 3 cohorts	12	
Total # of residents who remain in training in the residency program	0	
	PD	EP
Community mental health center	0	0
Federally qualified health center	0	0
Independent primary care facility/clinic	0	0
University counseling center	0	0
Veterans Affairs medical center	0	10
Military health center	0	0
Academic health center	0	0
Other medical center or hospital	0	1
Psychiatric hospital	0	0
Academic university/department	0	0
Community college or other teaching setting	0	0
Independent research institution	0	0
Correctional facility	0	0
School district/system	0	0
Independent practice setting	0	0
Not currently employed	0	0
Changed to another field	0	0
Other: Health Maintenance Organization	0	1
Unknown	0	0

Note: "PD" = Post-doctoral residency position; "EP" = Employed Position. Each individual represented in this table was counted only one time. For former trainees working in more than one setting, their primary position is being reported above.

DIVERSITY

The VA Caribbean Healthcare System adheres to the Equal Employment Opportunity guidelines in its recruitment and retention efforts. We encourage individuals of diverse backgrounds with regard to age, disabilities, ethnicity, gender, national origin, race, religion, sexual orientation, and other diverse personal or demographic characteristics to apply to our program.

As mentioned before, the Program requires applicants to be **bilingual in English and Spanish**. The population we serve is primarily Spanish speaking and all our documentation is done in the English language. Fellows must be capable of providing psychological services in both languages. Being aware that the requirement of bilingualism may limit the diversity of both faculty and trainees, bilingual applicants from diverse backgrounds are strongly encouraged to apply.

^{*}Note. Programs are not required by the Commission on Accreditation to provide all benefits listed in this table

The Psychology Training Programs emphasis in providing culturally competent care in the patient's preferred language is based in part on the U.S. Department of Health and Human Services Office of Minority Health, National Standards on Culturally and Linguistically Appropriate Services.

Psychology Setting

The Psychology Service is an integral part of the VA Caribbean Healthcare System. Our facility is a highly complex and comprehensive system which provides for the health care needs of all Veterans living in Puerto Rico and the Caribbean islands. We are part of the Veterans Integrated Service Network (VISN) 8, the Sunshine Healthcare Network that encompasses all the VA medical centers and clinics in Florida, Puerto Rico, and the US Virgin Islands. The VA Caribbean sponsors the Psychology Fellowship Program.

Psychologists at the VA Caribbean provide quality patient care through the development and implementation of a wide variety of clinical interventions designed to improve the psychological health of Veterans and their significant others. There are currently 53 Staff Psychologists in the System. Staff Psychologists at the VA Caribbean are found in Psychiatry Service clinics and programs (Psychiatric Acute Inpatient Care Unit, Behavioral Health Interdisciplinary Program), in Psychology Service clinics and programs (Mental Health Trauma and Recovery Center, Substance Abuse Programs, Primary Care Mental Health Integration, Neuropsychology Clinic), in Social Work (Day Hospital), in the Blind Rehabilitation Service, in the Geriatrics & Extended Care Service, in the Physical Medicine and Rehabilitation Service, in the Spinal Cord Injury and Disorders Service, and in the Arecibo, Ceiba, Guayama, Mayagüez, and Ponce clinics.

The Psychology Service is part of a larger umbrella of Behavioral Health Services within our institution that also include the Psychiatry and Social Work Services. Staff Psychologists are members of the Medical Staff and as such, they have clinical privileges to practice as licensed independent providers in our System. Psychology Service personnel work very closely and in collaboration with all mental health services within our medical center, with other associated health professions, and with primary and specialty medical services.

Our staff employs a wide range of theoretical orientations for case formulation and treatment that includes cognitive-behavioral, existential, humanistic, interpersonal, family systems, multicultural, psychodynamic, solution-focused, and integrational approaches. In addition, the Psychology Service directs its services to Veterans following a biopsychosocial approach. That is, to facilitate and promote his or her well-being and resolution of difficulties, we focus on the Veteran as a whole person, recognizing the influences of biological, psychological, and social, and contextual factors in his or her life and the need to work with his or her network of relationships such as couple, family, community, and institutions.

As a teaching hospital, we have affiliations with the four accredited medical schools in Puerto Rico: The University of Puerto Rico, Ponce School of Medicine, Universidad Central del Caribe, and the San Juan Bautista School of Medicine. The VA Caribbean Healthcare System has institutional and programmatic accreditation from the American Council of Graduate Medical Education and VA training programs accredited by the American Dental, American Psychological, American Pharmacology, and the American Dietetics Associations. The System has academic affiliations with 55 different associated health programs including nine different Nursing schools and Dental, Pharmacy, Dietetics, Social Work, Occupational Therapy, Physical Therapy, Laboratory, Radiology, Surgery, Cardiovascular Technology, and Respiratory Therapy programs. Through these affiliations, the VA Caribbean provides training to around 800 Residents, Interns, and students each year.

Training Aims

The primary **aim** of the Postdoctoral Fellowship Program at the VA Caribbean Healthcare System is for Fellows to develop advanced competencies required for independent functioning as Health Service Psychologists providing evidence-based psychological services to adults with complex medical, psychological and social conditions. We equally **aim** to provide a socially-conscious and culturally-relevant training experience for bilingual (Spanish-English) trainees from diverse backgrounds and social experiences. These **aims** pursue the development of conscientious, ethical, and competent Health Service Psychologists not only capable of providing services within traditional lines, but also able to respond to emerging service delivery trends and professional challenges. We emphasize the development of culturally-informed evidence-based practices which are consistent with the gender, sexual orientation, racial, social, and cultural diversity of this clinical setting.

These **aims** are relevant to the clinical population we serve as the work and training context is in a large and complex medical center servicing only adults who are mainly from a Puerto Rican ethnic background and including many diverse variables such as age, disability status, period of service in US Armed Forces, combat experience, race, gender, sex, sexual orientation, education, language preference, and socioeconomic status among others.

Consistent with the needs of this patient population, we aim at preparing our trainees for the provision of services which integrate research, theory, and evidence-based practices by exposing them to a combination of experiences that include clinical exposure, interdisciplinary involvement, clinical supervision, mentoring, and didactic training.

In the Women Veterans Integrative Mental Health (WVIMH) area of emphasis, the training underscores the importance of ensuring that women veterans' gender-specific health needs are cared for. We expect to develop expertise in treating women while attending to the particular issues associated to the female body functioning, women's social functioning and women's mental health issues. More specifically, during their 12-month training, each Fellow spends two days a week in the Women's Primary Care Clinic and two days a week each in the Behavioral Health Interdisciplinary Program (BHIP). Both settings include interdisciplinary teams. At the Women's Clinic, they learn and practice primary care mental health integration models that incorporate gender-specific aspects. At the BHIP, they learn and practice feminist and contextual psychotherapy, mind-body approaches, and evidence-based treatment approaches for trauma.

For those Fellows in the Primary Care Mental Health Integration (PCMHI) emphasis area, the training features an interdisciplinary approach to identify and address the behavioral health needs among primary care patients. Fellows in this area of emphasis spent the 12-month training in an interdisciplinary primary care clinic learning and practicing this model that promotes early identification, prevention of illness and health promotion by supporting the patient's capacity for increased functionality. Each Fellow is collocated in a Patient Aligned Care Team (PACT) to ensure that a collaborative approach to services is implemented.

We provide a learning environment, within which our trainees are treated with courtesy and respect in the context of a collegial relationship with their supervisors and other staff members. We assume the obligation of respecting the trainee's right to professional independence while ensuring accessible training staff, close supervision, and support to successfully meet their Postdoctoral training goals. The training model followed by the fellowship program is primarily experiential and has a strong emphasis on practice informed by science. Specifically, we follow a *practitioner-scholar* training model (Hoshmand & Polkinghorne, 1992; Stricker & Trierweiler, 1995) that seeks to integrate research, theory, and practice. Consonant with this model, the program encourages and assists Fellows to utilize their empirical research and critical thinking skills to base case conceptualization and clinical interventions on theoretical foundations and to engage in Evidence-Based Practices. This is facilitated through case assignments, individual and group clinical supervision, mentoring, didactic seminars and modules, modeling, case presentations, development of supervisory skills, administration of objective measures of patient progress, attendance to professional conferences, in-service training activities, and assigned readings. We emphasize a balanced combination of clinical experience, supervision, didactic training, and direct collaboration with Senior Psychologists and Interdisciplinary Mental Health Professionals.

In addition to encouraging Fellows to utilize empirical research to inform clinical conceptualization and intervention, the program fosters the utilization of culturally-informed evidenced-based practices which are consistent with the gender, ethnic, racial and cultural diversity of this clinical setting. Fellows will be assisted in implementing evidenced-based practices and engaging in the critical evaluation of these clinical interventions. Specifically, Fellows will be assisted through clinical supervision, didactic experiences, modeling, and mentoring to be at the forefront of psychological debates by closely inspecting the challenges and recommendations of implementing Culturally-Informed Evidenced-Based Practices. Furthermore, Fellows will be invited to increase their awareness of the impact of biases and ethical dilemmas upon clinical practice, and enhance their self-awareness as psychologists. We are equally committed to providing a culturally sensitive and relevant training experience for bilingual (Spanish-English) trainees.

An important component of the training is the establishment of supervisory competencies through successful supervision of psychology interns. Following a developmental supervisory approach,

Fellowship Supervisors will also help Fellows to focus on identifying their personal and professional strengths and to become aware of personal and professional aspects that they may be able to develop further for their own benefit as psychologists and for the benefit of their supervisees.

Training Program Competencies

Training is designed to develop advanced competencies, in both general and in emphasis areas of the program.

Our Level 1 competencies as required by the CoA are:

- **Integration of science and practice** Fellows will demonstrate the ability to critically evaluate and disseminate research or other scholarly activities.
- Ethical and legal standards- Fellows will demonstrate advanced competencies to respond ethically in increasingly complex situations in accordance with the APA Ethics Code and relevant local and federal laws and regulations, institutional bylaws and policies, and professional standards and guidelines.
- Individual and cultural diversity- Fellows will demonstrate advanced competencies to conduct
 all professional activities with sensitivity to human diversity, including the delivery of high quality
 services to a primarily Latino population. Fellows will demonstrate knowledge, awareness,
 sensitivity, and skills when working with these individuals who, notwithstanding identifying mostly
 with one ethnic group, embody a variety of innate and acquired diversity variables, and cultural
 and personal backgrounds and characteristics.

Level 2 competencies are advanced competencies consistent with our program's **aims** that we believe are an integral part of preparing professional for successful practice as Health Service Psychologists in healthcare settings providing culturally-informed evidence-based psychological services to adults with complex medical, psychological and social conditions.

Our Level 2 competencies are:

- Professional values, attitudes, and behaviors- Fellows will achieve advanced competencies
 demonstrating maturing professional identities, a sense of themselves as "Psychologists" and
 awareness of and receptivity to areas needing further development.
- Communication and interpersonal skills- Fellows will demonstrate advanced competencies
 that showing effective communication skills and the ability to form and maintain successful
 professional relationships.
- Assessment- Fellows will develop advanced competencies in evidence-based psychological
 assessment of adults with a variety of diagnoses, problems, and needs. Importance is placed on
 developing competence in diagnostic interviewing and assessment in the Fellows' chosen
 emphasis area of their program.
- Psychological Intervention- Fellows will develop advanced competencies in the provision of
 evidence-based interventions for adults with a variety of diagnoses, problems, and
 needs. Fellows will learn to select, culturally-adapt, and implement these interventions from a
 range of therapeutic orientations and models.
- Clinical Supervision- Fellows will develop advanced competencies, knowledge, and implementation of evidence-based supervision models and practices as they supervise Psychology Interns.
- Consultation and interprofessional/interdisciplinary skills- Fellows will develop advanced competencies in collaborating and providing effective consultation to other health service professionals in the areas of expertise comprised by the chosen emphasis area the program.

- Psychological Teaching- Fellows will develop advanced competencies in teaching by identifying specific psychoeducation/educational needs of particular clinical populations, professionals or trainees, designing, structuring and conducting psychoeducational and teaching activities of a targeted population, and development or refinement of teaching and presentation skills.
- Organizational, management, and administration issues pertinent to psychological service- Fellows will develop competencies in managing the diverse roles required to be played during the training year, by demonstrating awareness and understanding of systems and organizational issues pertaining clinical work, and by developing critical thinking skills related to finding solutions to systems and organizational problems

Each Fellow is selected to a join a particular emphasis area (outlined below) and training occurs in the context of the clinical experiences the program provides. Fellows train in the clinic(s) associated with their particular area of emphasis and receive supervision from the psychologists leading those clinics or programs. The Psychology Fellowship Program is a full-time, 12-month experience. The Program envisions Fellows as junior staff members requiring specialized supervision and participating in an educational program.

Consonant with the practitioner-scholar model (Hoshmand & Polkinghorne, 1992; Stricker & Trierweiler, 1995) our training emphasizes learning within the context of core clinical and didactic experiences. We are aware that the Fellows come to us with different levels of experience and we build their training upon baseline competencies acquired during internship. We tailor supervision according to the level of competency the Fellows bring to the program. Therefore, many of the training experiences are individualized and their intensity and complexity will be based on the Fellow's baseline competencies. Group training and supervision are tools used to immerse the Fellow into different levels of clinical experiences and to develop advanced clinical competencies. The Fellows will be granted progressively more autonomy and responsibility over the course of the year in an organized sequence. The goal is that Fellows graduate with the competencies of an advanced level psychologist. Fellows work in the VA Caribbean main facility in San Juan for five days a week throughout the Fellowship year.

Supervision

Fellows are expected to work 40-hours per week. Supervision is formally-scheduled and includes a minimum of two hours of individual face-to-face supervision time per week and generally will include more time as needed. An additional minimum of two more hours of group supervision and structured didactic experiences are also part of the program.

Fellows also gain experience in supervising junior level psychology trainees. That supervision is in turn supervised by licensed Staff Psychologists. This "Supervision of Supervision" experience is designed to familiarize trainees with the theory and methods of clinical supervision. Fellows will have the opportunity to assess their readiness to assume the role of clinical supervisor and to identify areas in need of further development to engage in such professional endeavor.

We conceptualize the supervisory process as a collaborative relationship. We have the expectation that Fellows will be open to receiving feedback about their performance including areas to improve. We also have the expectation that Fellows will engage in a process of self-reflection and development of awareness which may only occur if there is openness to speak about all topics relevant to the development of professional competencies including personal aspects that may come into play in clinical work. In that sense, we strongly support the APA Code of Ethics (2010) in that no trainee will be required to disclose personal information regarding various topics, but our program strongly believes that a certain degree of openness to self-disclosure through self-reflexive practice is imperative for the development of competencies as a professional psychologist.

In our Program, Clinical Supervisors employ a developmental supervisory approach. Training is sequential, cumulative, and graded in complexity promoting that Fellows develop an increased degree of knowledge, skills, abilities and competencies required for independent functioning as a Health Service Psychologists. Through this approach, Supervisors have initial expectations of doctoral level competencies on general evaluation and psychotherapy competencies, that will progressively improve as Fellows advance through services that take into account gender, veteran, cultural-specific matters. The

Program is designed so that Fellows will progressively advance their specialized clinical skills and acquire expertise as the fellowship year progresses.

Evaluations

Supervisors will complete formal evaluations every quarter to assess Fellows' progress toward competence as defined by the program's goals and objectives. Fellows evaluate clinical experiences and supervisors at the end of their training year.

The evaluation of the competencies pertinent to the various clinical experiences is based on information obtained from the direct observation of the Fellow's behavior, written documentation of clinical work, their reports in supervision sessions, case discussions and presentations. Also, during their scheduled supervision meetings, Supervisors and Fellows regularly discuss training goals, strengths, progress, and areas that need improvement.

Areas of Emphasis and Description of Clinical Program Settings

Women Veterans Integrative Mental Health

The Women Veterans Integrative Mental Health (WVIMH) Services area of emphasis follows the VA Health Initiative that underscores the importance of ensuring that women veterans' gender-specific health needs are cared for. Women represent the fastest growing population of the U.S. military. We subscribe to the VA Women Veterans Health Initiative goal of ensuring that all women veterans receive timely, equitable, health care services at VA facilities and we are committed to train psychologists who will provide these services. We aim at developing psychology professionals beyond traditional lines, who can integrate and develop expertise related to gender-specific and cultural diversity issues and support the development of a cultural and gender sensitive approach to psychotherapy. We are committed to train professionals who could expand their professional scope to understand and incorporate in their delivery the diverse contexts in which women veterans thrive. As such, we expect that Fellows develop conceptualization and clinical skills in contextual and feminist models of psychotherapy, proficiency in diagnosing and treating psychiatric disorders frequently encountered in the female veteran population and in assessing medical disorders and normal biological process among women and their correlation with mental health issues. In addition, the Fellows will be trained in the following areas: military culture and women in the military, gender diversity, sexual orientation, LGBT, racial and ethnocultural issues and their impact on women's functioning. Fellows who are in the WVIMH emphasis area will also be trained in the utilization of evidence-based intervention models (i.e., Acceptance and Commitment Therapy, Interpersonal Psychotherapy, and/or Cognitive Processing Therapy) in the clinical work with women.

During the training year, the Fellows will rotate through clinics that provide services to women veterans in order to maintain a focus on gender-specific and diversity issues in treatment and to develop ongoing interdisciplinary and collaborative relationships with the clinic's staff. The clinics that are available to Fellows are Women's Clinic (Primary Care Mental Health Integration), Behavioral Health Interdisciplinary Program, and Mental Health Trauma and Recovery Center. Fellows are exposed to a diverse group of female patients and a great variety of diagnoses within medical, psychiatric and comorbid conditions. During their experiences in these clinics, the Fellow will have direct access to clinical work and will participate in treatment planning, intra-clinic collaboration, and consultation.

Didactic training is provided and emphasized as the context to the specific areas of training. Throughout the year, the Fellows will participate in practical-didactic-experiential seminars on Women's Health and Well-Being, LGBT issues, military culture and experiences, group therapy for women, primary care mental health integration models, evidence based and trauma focused treatments, and integrative psychotherapy models. Fellows will also have the opportunity to participate in seminars taught to psychiatry residents and primary care residents and online courses and webinars offered by the VA and the VA Women's Health Practice Based Research Network.

Fellows may offer didactic trainings to colleagues, interns and multidisciplinary staff on-site, off-site and to other VA's focused on the work with women veterans and cultural issues. Mentoring and supervision are an essential aspect of training as they help in facilitating professional and ethical development. Fellows are at either end of the supervisory spectrum. Their learning is fostered by intensive immersion in clinical

experiences in specific areas of women's health with supervision by licensed psychologists with established competencies in these areas. They are also trained in supervisory skills and will assume the supervision of psychology trainees.

Facility Programs Available for Training

Three facility programs will be the training context for the Fellows in this emphasis area: Women's Primary Care Clinic, Behavioral Health Interdisciplinary Program, and Mental Health Trauma and Recovery Center. The clinical supervision is provided by clinicians with expertise in each of the following clinical areas.

- The Women's Clinic is a primary-care outpatient unit, organizationally located within the Primary Care Service, that serves female veterans within our System. The Clinic has primary care physicians, social workers, and nurses. This clinical experience focuses on developing the skills for clinical consultation within a primary care setting and on developing expertise on short term psychological intervention models that place emphasis on the patient's capacity for increased functionality. The WVIMH Fellows will be part of the Women's Clinic Patient-Aligned Care Team (PACT). While at the Women's Clinic, these Fellows will be trained in the PCMHI model. They will be within the primary care clinic as Collocated Behavioral Health Professionals. They will receive consults from the Primary Care Provider, who would be the professional identifying the initial needs for the veteran. Same day access to patients who require psychological services during their medical appointments will be available. The Fellows will conduct a assessment in which they will determine what would be the best course of clinical interventions. The interventions may range from 1-6 sessions during which the patient will be assisted in identifying personal, social and community resources that could help her maximize functionality, prevent complications or chronicity and promote health. The Fellows will provide recommendations to the medical provider that could contribute to the prompt improvement of the patients' health. Longer term individual psychotherapy, group psychotherapy or family therapy may be among the modalities recommended to facilitate the patient's progress and available within the Behavioral Health Interdisciplinary Program. These recommendations will vary depending on the patients' need. Fellows will be trained in Acceptance and Commitment Therapy (ACT) and will provide group psychotherapy and individual psychotherapy using this modality. As part of the rotation at the Women's Clinic, Fellows will be able to co-facilitate psychotherapy and psychoeducational groups for women dealing with various medical diagnoses.
- The Behavioral Health Interdisciplinary Program, organizationally located within the Psychiatry Service, is the setting where patients identified as needing longer term mental health treatment are referred. Typically, these are patients who, in addition to health-related issues, present other moderate to severe psychiatric diagnoses. The range of diagnoses is varied and includes psychiatric disorders due to medical conditions, adjustment disorders and family problems, mood disorders, combat and military sexual trauma, and occupational difficulties. Within the Behavioral Health Interdisciplinary Program, Fellows treat patients using a variety of psychotherapy modalities such as evidence-based and trauma focused psychotherapies, group and couple therapy, psychodynamic, feminist and contextual individual psychotherapies. All treatments offered by the Fellows are gender sensitive and emphasize aspects pertinent to gender issues, women's health and social contexts.

The Behavioral Health Interdisciplinary Program has diverse interdisciplinary teams composed by psychiatrists, psychologists, clinical social workers, and nurses. As part of this experience, Fellows work with all clinical teams. Fellows may provide in-service and interdisciplinary training in topics such as evidence based practices, trauma-focused work, LGBT issues and psychotherapy with women, among others. They also have the opportunity to provide consultations.

Substance Use/ PTSD Program is organizationally located within the New Beginnings Clinic which is part of the Psychology Service. The New Beginnings Program (Substance Use Disorders /Intensive Outpatient) is focused on the treatment of addiction and substance use disorders. Within the SUD/PTSD experience, Fellows will provide services to female veterans dealing with histories of trauma –PTSD, Military Sexual Trauma, combat-related trauma, and other Trauma-related diagnoses and substance use disorders. The Fellows will be exposed to diverse treatment

modalities designed to address post-traumatic stress disorder and substance use disorders. The treatment modalities in which they will be trained are evidence-based and will follow recommendations from VA/DOD Clinical Practice Guidelines for management of PTSD and dual diagnosis. These include but are not limited to Cognitive Processing Therapy (CPT), Prolonged Exposure (PE), Mindfulness Based and Dialectical Behavioral Therapy approaches. Cognitive Behavioral Therapy, Acceptance and Commitment Therapy and Motivational Interviewing Approaches are also considered according to the needs of female veterans. The New Beginnings Program has an interdisciplinary team composed by psychiatrists, psychologists, a clinical social worker, addiction therapists and nurses. Fellows are supervised by a psychologist formally trained and certified in these modalities.

Primary Care Mental Health Integration

The **Primary Care Mental Health Integration** (PCMHI) area of emphasis features an interdisciplinary approach to identify and address the behavioral health needs among primary care patients with the purpose of early identification, prevention of illness and health promotion thus supporting patient's capacity for increased functionality. This model is one of collaboration between primary health, mental health and the patient that has proven to be highly effective in achieving behavior change and self-agency in patients. Fellows will be part of an interdisciplinary setting embedded within the Primary Care clinics which are called **Patient Aligned Care Teams (PACT)**. Each Fellow will be collocated at PACT clinics in San Juan to ensure that a collaborative approach to services are implemented. Fellows serve as consultants who will be readily accessible to primary care providers for consultation, provision of support and assistance to staff, facilitate linkage between clinics, and/or initiate services. The Fellows will be key members of the primary care team in charge of determining appropriate level of care, best course of clinical interventions, and providing treatment recommendations to the team. Behavioral health visits can range in number of sessions from 1-6 sessions during which the patient will be assisted in identifying personal, social and community resources that could help him/her maximize functionality, prevent complications or chronicity and promote health. The Fellows will provide recommendations to the physician that could contribute to the prompt improvement of the patients' health. These recommendations will vary depending on the patients' need. Individual psychotherapy, group psychotherapy or family therapy may be among the modalities recommended to facilitate the patient's progress. Same day access to patients who require mental health services during their medical appointments will be available.

Fellows in this emphasis area will be trained in the PCMHI model. The yearlong training enables the learning and implementation of: Consultation theoretical models and various types of consultation with medical providers (e.g., curbside, conjoint medical appointments), evidence-based theory and interventions, empirical research on co-morbid medical and psychiatric disorders, development of brief same day evaluations, integrative treatment plans and recommendations and determination of an evidence-based treatment (i.e., Motivational Interviewing, CBT, ACT) for common behavioral health problems.

Facility Programs Available for Training:

There are seven PACTs in the San Juan primary care clinics through which the Fellows will rotate and develop experience. The PCMHI staff is located within the PACTs which are part of the Primary Care Service, but the PCMHI program is organizationally part of the Psychology Service. This clinical experience focuses on developing the skills for clinical consultation within a primary care setting and on developing expertise on short term psychological intervention models that place emphasis on the patient's capacity for increased functionality. The Fellows will be trained in a model of collaboration between primary health and mental health. Throughout the year the Fellows will be within the primary care clinic as the Collocated Behavioral Health Professional. They will receive the consults from the Primary Provider, who would be the provider identifying the initial need. The Fellows will conduct a triage in which they will determine what would be the best course of clinical interventions. The Fellows will provide recommendations to the physician that could contribute to the prompt improvement of the patients' health. These recommendations will vary depending on the patients' need.

Seminars and Didactic Experiences:

Didactic dialogues and seminars are offered throughout the year. Most of them include an experiential component, group supervision, didactic lectures and clinical and/or teaching experiences.

Seminars and didactics required for all Fellows:

- Consultation/Integrated Care Seminar and Supervision
- Acceptance and Commitment Therapy
- Sexual Health
- · Gender and Diversity Study Group
- Professional Mentoring/Administrative Meeting
- Clinical Supervision

Consultation/Integrated Care Seminar and Supervision

This seminar is designed to provide Fellows with the basic theoretical and clinical knowledge in behavioral health consultation. Emphasis on the triadic nature of the consultative relationship, distinct consultation models and collaborative systems and their applicability to the hospital setting will be discussed. Fellows will receive training and supervision on how to manage their role as psychologists in primary care. For example, they will have the opportunity to shadow members of the Primary Care Mental Health Team. As behavioral health consultants, they will also participate in PACT case discussions and interdisciplinary meetings. Fellows will be encouraged to develop a project in which they could design brief training modules in behavioral health for other professionals and colleagues.

Acceptance and Commitment Therapy (ACT)

The ACT supervision/didactic seminar focuses on the following aspects: 1) ACT theory as an evidenced based treatment for multiple medical conditions; 2) Consistent with act ACT theory, experiential exercises and metaphors are practiced in the seminar; 3) Group supervision; 4) Discussion of contextual variables in this treatment (culture and gender). Fellows will be responsible to provide group therapy to patients carrying varied medical diagnoses common among the VA population.

Sexual Health

The seminar intends to provide fellows with a basic theoretical and clinical understanding of sexual functioning and will afford the fellow an opportunity to apply intervention models into daily practice. Special attention is paid to exploring and understanding sociocultural dimensions that underlie sexual health and wellbeing and how this affects a healthy sexual functioning. Emphasis is also placed on providing Fellows an opportunity in which to have an in depth discussion about sexual practices, as well as biases, preconceptions, and prejudices about sexuality and how these positively or negatively affect patient care.

Gender and Diversity Study Group

This seminar is designed to increase awareness on gender and diversity issues and to create a space in which a dialogue about these issues could evolve. Fellows are expected to develop a clinical framework in which the contextual aspects of the patients are considered in the formulation and interpretation of their clinical presentation. Emphasis is given to the intersectionality among these contexts (e.g., culture, gender, ethnicity, race, social class and sexual orientation) and the role that they play on the patients' life. The Fellows are encouraged to examine the role that these contexts have on their own life and professional functioning. This study group aims to prepare the Fellows for: a) delivering psychological services that consider the patient and her own diversity in values, beliefs, culture, and interactional styles ,b) transmitting this knowledge to their supervisees and other professional audiences. Fellows will design training modules for other professionals, colleagues, and psychology interns.

Professional Mentoring/Administrative Meeting

This meeting and provides the scenario where Fellows will have the opportunity to address issues regarding their professional goals and development. Supervisors will assist the Fellow in identifying and structuring the steps to achieve these goals and to orient trainees about pertinent professional issues to be encountered in professional practice. It seeks both to ease entry into the profession and to promote professional advancement. Other topics include discussion of the standards for the provision of psychological services, licensure, employment and private practice, professional liability and risk management, professional membership, continuing education, and self-care for psychologists. Fellows will also be trained to function as consultants to other professionals. Among their tasks will be the training and consultation to staff and junior trainees.

Supervision of Supervisors (SOS) (Experiential/didactic)

This experiential module is designed to familiarize trainees with the theory and methods of clinical supervision. Fellows will have the opportunity to assess their readiness to assume the role of clinical supervisor and to identify areas in need of further development to engage in such professional endeavor. They also will share their experiences as the supervisors of interns and will be able to practice the supervisory methods that best fit their style of supervision.

Additional seminar for WVIMH area of emphasis:

Women's Health and Wellbeing Seminar (Mind/Body) Seminar

This seminar is designed to provide Fellows with the basic theoretical and clinical knowledge in the concepts of mind/body connection and its direct interaction with emotional and psychological issues. Emphasis on a holistic view of psychotherapy and healing is fostered throughout the seminar, discussion of functional and dysfunctional body processes, psychosocial aspects of their manifestation, gender specific health and well-being issues and sexuality will be discussed. Fellows will receive training and supervision on specific interventions and treatment methods. Emphasis is given to identifying and eliciting patient's narratives in which the body-mind connection is processed and the patient's well-being is promoted.

Trauma-Focused Psychotherapy

This is an experiential, didactic, and practical seminar where Fellows in the Women's Veterans emphasis area will be trained in the provision of specialized outpatient care, education, and consultation services for female veterans identified as suffering from combat and non-combat related PTSD, that includes Military Sexual Trauma and substance use disorders. The Fellows will be exposed to diverse treatment modalities designed to address post-traumatic stress disorder and comorbid disorders as well. The treatment modalities in which they will be trained are evidence-based and will follow recommendations from VA/DOD Clinical Practice Guidelines for management of PTSD and dual diagnosis. These include but are not limited to Cognitive Processing Therapy (CPT), Prolonged Exposure (PE), Mindfulness Based and Dialectical Behavioral Therapy approaches. Cognitive Behavioral Therapy, Brief Eclectic Psychotherapy and Motivational Interviewing Approaches are also considered according to the needs of female veterans.

Additional seminars for PCMHI area of emphasis:

Advances in Psychotherapy for Primary Care

This supervision/didactic seminar focuses on evidenced based practices for health promotion, disease prevention and patient self-management within the primary care setting. It aims to increase awareness on evolving models of behavioral health integrated services in primary care and to train Fellows in direct services, supervision and training of other professionals. Fellows will receive training and supervision on specific interventions and treatment methods implemented in multidisciplinary settings, including disease prevention and disease management, and patient self-management, among others. Fellows will be responsible to intervene with veterans carrying behavioral health concerns and varied medical diagnoses common among the primary care population such as Insomnia, Depression, Anxiety, Adjustment to illness, weight management, cancer and chronic pain. Group supervision will focus on discussion of both clinical and contextual variables. Furthermore, given the particular context of the VA Caribbean Healthcare System, Fellows will be expected to develop a sociocultural framework for the delivery of Evidenced Based psychological services that considers the patient and his or her own diversity in values, beliefs, culture, and interactional styles and to be able to transmit this knowledge to their supervisees and other professional audiences.

Requirements for Completion

Total Hours: Fellows are expected to work 40-hours per week and complete a minimum of 2000 training hours during the year. Our Fellowship is a full-time one-year appointment that must be completed in no fewer than 12 months. Our program exceeds the requirements for licensure as a psychologist in Puerto Rico and meets or exceeds postdoctoral experience licensure requirements for all US jurisdictions. The start date for the next Fellowship is August 30, 2021.

Work Hours: The scheduled work hours are Monday through Friday from 8:00am-4:30pm for Fellows within the Women's Mental health emphasis area and from 7:30am-4:00pm for Fellows in the PCMHI emphasis area of the program. Fellows work at least 40 intensive hours each week. The possibility of needing to work more hours is a reality for most VA psychologists and is likely to be the same for most Fellows. How many hours if needed will a Fellow work beyond 40 will depend on many factors including interest in particular training experiences, performing readings and preparing for seminars, timemanagement skills, and competencies in completing clinical documentation.

Patient Contact: Fellows are expected to spend about 50% of their tour of duty in direct patient care and 50% of their time receiving and/or providing clinical supervision, participating from didactic experiences or offering professional presentations to others. A goal of achieving at least 500 hours of direct patient care in the year is expected.

Psychological Assessments: Fellows will complete psychological assessment of patients in their primary areas of emphasis throughout the year. Assessments have the purpose of exposing Fellows to the wide range of problems veterans present, as well as to evaluate their needs, diagnostic issues, to assess readiness, motivation, and appropriateness for psychological treatment, and to determine disposition and make recommendations.

Psychotherapy: During the training year, Fellows will gain experience conducting PCMHI evaluations and interventions, individual, couples/family, and group psychotherapy, case consultations, triage and behavioral health visits. Short and long-term psychotherapy patients and PCMHI patients are closely supervised by staff psychologists throughout the year. Fellows are expected to complete a minimum of 11 hours a week of psychotherapy.

Teaching & Education: Fellows are required to provide training and education to patients, colleagues, junior trainees, and other professionals via formal presentations during the training year on topics relevant to veterans' mental health, diversity issues, and development of professional competencies. They are also required to supervise interns performing psychological evaluations. They may present cases or other educational material within didactic seminars and modules and within their clinics. Fellows may present in Center-wide special activities for the general public during the Sexual Assault Awareness month, Breast Cancer Awareness month, PRIDE month and LGBT Health Awareness Week activities.

Evaluation Criteria

In the context of a supervisory relationship, Fellows receive ongoing feedback regarding their professional strengths and areas in need of improvement.

Fellows are formally evaluated at 3 points in time (rating periods) during the Fellowship year using the Fellows Competence Evaluation Form (FCEF). The rating periods are at the end of (1) December, (2) April, (3) August. The FCEF provides for the evaluation of both overall competencies and specific competencies. In our program we call specific competencies, the smaller elements that contribute to a larger overall competency; what the CoA refers to as Elements associated with this competency. As mentioned before, the Program's competencies are: Integration of Science and Practice, Ethical and Legal standards, Cultural and Individual Diversity Issues, Professional Values, Attitudes, and Behaviors, Communication and Interpersonal Competencies, Assessment, Psychological Intervention, Clinical Supervision, Consultation and Interprofessional/Interdisciplinary Competencies, Psychological Teaching, and Organizational, management and administrative issues in psychological practice.

To successfully complete the Fellowship, Fellows need to obtain ratings of 5 (advanced competencies) in all *overall competencies and* may receive ratings between 4 and 5 in elements associated with the overall competency (*specific competencies*).

Both specific competencies and overall competence domains are evaluated as follows:

Level 5: Advanced competencies. Can perform the aspect independently. Competencies comparable to autonomous practice at the licensure level. Rating expected at completion of postdoctoral training or level that would be expected of junior staff psychologists. Competency attained at an entry level psychologist position with no formal need for

supervision. This is the level expected for Fellows in overall competence domains at the completion of the Fellowship year. The assigned type of supervision is *available*; direct observation and modeling is not required.

Level 4: High-Intermediate competencies. Needs little or occasional supervision for the aspect. A frequent and common rating expected at completion of internship or throughout postdoctoral training. Competency attained in all except for non-routine cases or tasks; supervisor provides overall management of trainee's activities; depth of supervision varies as clinical needs warrant. The trainee needs little supervision, and the supervisor can rely primarily on summary reports by the trainee. This level is acceptable for Fellows in specific competency areas at the end of the training year. It is the internship goal of doctoral interns in at least 8 of the 9 overall competence domains at the end of the training year. Competency attained is comparable with an entry level psychologist position with continued supervision recommended. The assigned

type of supervision is available or area; direct observation and modeling are not

Level 3: Intermediate Competencies. Aspect remains a focus of routine or regular supervision. The trainee needs routine supervision, but he/she is able to work this aspect fairly independently, direct observation or supervision is not required. Competency level meets standards for an intern in training. Common rating throughout internship. It is also an acceptable rating for Fellows in specific and overall competencies during the first rating period and in specific competencies in the second rating period. It is an acceptable rating for interns in specific competencies at the end of the training year. The assigned type of supervision is available, area, or room; direct observation and modeling may occasionally be required.

required.

- Level 2: Entry level competencies. Intensive supervision is needed. Most common rating for practicum students. The supervisor needs to work with the trainee, giving instruction, monitoring the application for competence and accurate reporting of the task. This is the minimum level expected of incoming doctoral interns and it is the end goal for practicum students on all tasks. Competency level indicates the need for clinical experience and may indicate the need for remediation depending on the rotation assignment and rating period. The assigned type of supervision is area or room; direct observation and modeling is frequently required.
- **Level 1: Basic training is needed** for the aspect. The trainee requires very intensive supervision, needs basic instruction before applying this task to patients, and direct observation or supervision during the application of the task. This level is initially assumed of all practicum students. When Interns and Fellows receive this rating on any assessed competence, an Evaluation Review Process is initiated as described in the Program's Due Process Statement. Competency level does not meet standards for Interns and Fellows and the need for remediation is major; the assigned type of supervision is **room**; direct observation and modeling is required; restrictions may be placed on the trainee's clinical activities.

The Psychology Fellowship Program at VA Caribbean Healthcare System has the responsibility to foster and closely monitor the progress of Fellows to facilitate their professional and personal development.

The evaluation and review of Fellow's performance in our program is guided by due process guidelines that will be given to Fellows at the beginning of the training year. Due process ensures that decisions made by the program about Fellows are not arbitrary or personally based. To assure this, the program identifies specific evaluative procedures, which are applied to all trainees, provides for feedback and remedial actions, and to have appropriate appeal procedures available to the Fellow facilitating he/she may challenge the actions recommended by the program or through which the Fellow can channel a complaint against a supervisor.

Fellows are also expected to adhere to the Ethical Principles of Psychologists and Code of Conduct of the American Psychological Association and the Código de Ética of the Junta Examinadora de Psicólogos de Puerto Rico.

Administrative Policies and Procedures

Number of Fellow Positions and Stipend: By February of each year, we expect confirmation from VA Central Office on the number of positions we will have available and the amount of the stipends we will receive each training year. For the 2021-2022 year, we were allocated 4 Psychology Fellow positions with a stipend of \$46,222. The stipend is divided into 26 pay periods for the year. Checks are electronically deposited into the Fellows' bank account. Stipends are subject to federal and local taxes and Social Security and Medicare withholdings.

Benefits:

Health Insurance- Fellows are eligible to receive health insurance coverage equal to that of Federal Government employees. The Federal Employee Health Benefits (FEHB) program offers a choice of plans and options (look for *State Specific plans* for local health insurance coverage options). VA pays the larger percentage of the cost for the insurance and Fellows pay a percentage of the cost for individual or family coverage.

Vacation and Sick Leave- Fellows accrue annual (vacation) and sick leave at a rate of 4 hours of each per pay period (every two weeks). In addition, Fellows receive the 10 Federal holidays. Fellows need to make judicious use of their leave time to insure that training requirements and patient care are not negatively affected. The APA Standards of Accreditation state that: "Each resident must complete a minimum of 1 year of full-time training in no fewer than 12 months...." Therefore, Fellows cannot accumulate leave time in an effort to end the fellowship earlier than the last day of the training year as that would not be considered a completed program.

Authorized Absence: Up to 40 hours of Authorized Absence (AA) without charge to Annual or Sick Leave may be granted to attend off-site educational workshops and seminars and VA job interviews. We have been successful in receiving approval of AA for our Fellows for the purposes mentioned above. However, AA is subject to the discretionary approval of the VA Caribbean Chief of Staff as must follow VA guidelines as to what constitute a qualifying activity which would also be in the best interest of VA. Granting AA means that VA (taxpayers) would be covering part of the costs associated with the activity the trainee is attending. AA has to answer these questions: (1) How will the activity be of substantial benefit to VA in accomplishing its general mission or one of its specific functions. (2) How will the activity clearly enhance an employee's (trainee) ability to perform the duties of the position presently occupied or may be expected to prospectively occupy. (3) Are the basis for excusing the employee (trainee) fairly consistent with prevailing practices of other Federal establishments in the area concerning the same or similar activities.

Malpractice insurance: The Veterans Health Administration (VHA) does not provide a formal malpractice insurance policy coverage for its employees, including trainees and psychologists. However, the Federal Torts Claim Act indicates that the Attorney General will defend a person who is sued for malpractice or negligence if he or she was acting within the scope of his or her employment in or for the VHA. The Federal Tort Claim Act extends to VA trainees.

Appointment: Trainees are recruited as Postdoctoral Fellows and will be identified as such to both the staff and population served. Fellows work under the same personnel regulations as Federal employees. An applicant selected for the Fellowship, must be willing to submit to a pre-employment background check, a physical exam, and may be subject to the government's employment drug screening procedure. VA conducts random drug screening tests on selected current personnel as well as new employees. The Federal Government also requires that male applicants to VA positions who were born after December 31, 1959 must sign a pre-appointment Certification Statement for Selective Service Registration before they are employed. All Fellows also will have to complete a certification of US citizenship prior to the appointment.

Facility and Training Resources

Office space and computers: Women's Fellows share an office in the Women's Clinic and an office in the Behavioral Health Interdisciplinary Program. Interprofessional Primary Care Mental Health Fellows will have an office in the PACT Clinics in the second floor and an office in the PACT Clinics located in the first floor in the Primary Care area. Since our main method of internal communication and access to

patient information is through electronic means, Fellows have personal computers with access equal to that available to regular staff members.

Library: All the services provided by the Medical Library to regular staff members are available to our trainees. The collection of our library consists of 25,000 books, journals, and audiovisual learning resources for the use of clinical staff and trainees. The Psychology and Behavioral Sciences Collection provides coverage of nearly 550 full text journals, including more than 500 peer-reviewed titles. Our library also has electronic subscriptions to numerous mental health journals. Trainees may access these journals from any computer terminal in the Center.

Parking: Parking space is available for employees and trainees. However, all staff is encouraged to use our Transit Benefit Program (see below).

Transit Benefit Program: The VA Caribbean Healthcare System is conveniently located close to two train stations. Interns may participate from our Transit Benefit Program through which employees and trainees choosing to commute to the hospital by train will be covered for their fare expenses. Many employees and visitors regularly walk from the train station to the Center, but VA buses are also available to pick-up and drop-off employees and patients at the train stations close to the Center.

Training Staff

Rafael E. Cancio González, Ph.D.

Counseling Psychology: Temple University, 2000

Internship: Citrus Health Network, 1998

Director of Training, Internship & Fellowship Programs

Chairperson, Associated Health Professions Educational Programs Committee

Clinical interests: Clinical Supervision and Training, Couples & Family Therapy, Multiculturalism, Object-Relations Psychodynamic Psychotherapy, Motivational Interviewing, Psychodiagnostic Assessment, and Forensic Psychology.

Aracely Báez-Fuerte, Psy.D.

Clinical Psychology: Carlos Albizu University, San Juan, 2008

Internship: Tewksbury Hospital, Massachusetts, 2005

Staff Psychologist: Primary Care Mental Health Integration Program

Clinical interests: Adult Psychotherapy; Individual and Group Psychotherapy, Evidenced-Based

Treatments, PTSD.

Yarí L. Colón-Torres, Ph.D.

Clinical Psychology: DePaul University, 2007

Internship: University of Miami/Jackson Memorial Hospital, 2007 Staff Psychologist: Primary Care Mental Health Integration Program

LGBT Veteran Care Coordinator

Clinical interests: Evidenced-Based Treatments (e.g., ACT), Cultural Diversity (e.g., LGBT population),

Health Psychology, Community Psychology and Research.

Frances Figueroa-Fankhanel, Psy.D.

Clinical Psychology: Carlos Albizu University, San Juan, 2010

Internship: VA Caribbean Healthcare System, 2010

Staff Psychologist and Program Manager: Primary Care Mental Health Integration Program Clinical interests: Adults, couples, and families. War veterans; sexual offenders; children, adolescents, and adults with Gender Identify issues; and LGBT community. Solution-Focused Psychotherapy and other forms of brief therapy interventions, Systemic Sex Therapy, Holistic and Integrative approaches in the treatment of mood and anxiety disorders (i.e., Cognitive-Behavioral Psychotherapy, Acceptance and Commitment Therapy, Positive Psychology, Health Psychology), Psychological Assessment.

Karen Malaret-Gómez, Psy.D.

Clinical Psychology: Carlos Albizu University, Miami, 2012

Internship: VA Caribbean Healthcare System, 2012

Postdoctoral Fellowship in Clinical Psychology with special emphasis in Women's Mental Health: VA Caribbean Healthcare System, 2014

Staff Psychologist: Physical Medicine & Rehabilitation Service - Interdisciplinary Pain Rehabilitation Program (CARF accredited)

Clinical Interests: Gender and Diversity Issues, Sexual Health, Mind/Body Integration,

Psychoneuroimmunology, Psycho-Oncology, LGBT, Issues Related to the Female Reproductive System (e.g., PMDD, Postpartum, Perimenopause, PCOS, Cancer, STD's, Sexual Pain Disorders), and Sexual Trauma. Integrative Approaches, Acceptance and Commitment Therapy, Interpersonal Psychotherapy, and Brief Psychodynamic Psychotherapy.

Eduardo M. Martínez-Morales, Ph.D.

Clinical Psychology: George Peabody College at Vanderbilt University, 1986 Internship: University of California at San Francisco General Hospital, 1982

Staff Psychologist Primary Care Mental Health Integration Program

Health Behavior Coordinator

Clinical Interests: Motivational Interviewing for Chronic Disease Self-Management, TEACH for Success Health Coaching, Cognitive-Behavioral Therapy for Depression, Training and Consultation, Shared Medical Appointments, Group Psychotherapy, Psychology of Sports Performance/Physical Exercise, Stress Management/Relaxation Training.

Glendalys Rivera-Reyes, Ph.D.

Clinical Psychology: Ponce Health Sciences University, 2017

Internship: Ponce Health Sciences University Psychology Internship Consortium, 2017

Postdoctoral Fellowship in Clinical Psychology with special emphasis in Women's Mental Health: VA Caribbean Healthcare System, 2019

Staff Psychologist: New Beginnings Clinic, specialist in PTSD/SUD comorbidities.

Clinical Interests: Women's Health, Military Culture, Personality Disorders, Complex trauma, Chronic Pain, Addictions and Recovery. Trauma-informed practices, Mind-Body Interventions and Feminist approaches. Evidence-Based Practices (i.e., Dialectical Behavioral Therapy, Cognitive Processing Therapy, Acceptance and Commitment Therapy). Research, academia, clinical supervision and training.

Mabel E. Quiñones Vázquez, Ph.D.

Clinical Psychology: City University of New York, 1996

Internship: Bellevue Hospital, 1994

Pre-doctoral clinical training in Family Therapy: Roberto Clemente Center, Gouverneur Hospital, New York, 1986.

Coordinator, Psychology Postdoctoral Fellowship

Staff Psychologist: Behavioral Health Interdisciplinary Program

Clinical Interests- Clinical Training and Supervision, Multicultural and Gender Issues, Contextual

Psychotherapy, Family and Couple Therapy, Brief Psychodynamic Psychotherapy.

Current and Recent Trainee Classes

2020-21

Psy.D., Clinical Psychology, Carlos Albizu University, San Juan.

Ph.D., Clinical Psychology, Carlos Albizu University, San Juan.

Psy.D., Clinical Psychology, Carlos Albizu University, San Juan.

Psy.D., Clinical Psychology, Carlos Albizu University, San Juan.

2019-20

Psy.D., Clinical Psychology, Palo Alto University, PGSP-Stanford Psy.D. Consortium.

Psy.D., Clinical Psychology, Ponce Health Sciences University.

Psy.D., Clinical Psychology, Carlos Albizu University, San Juan.

Ph.D., Clinical Psychology, Carlos Albizu University, San Juan.

2018-19

Ph.D., Clinical Psychology, Carlos Albizu University, San Juan.

Psy.D., Clinical Psychology, Carlos Albizu University, San Juan.

Ph.D., Clinical Psychology, Ponce Health Sciences University.

Psy.D., Clinical Psychology, Ponce Health Sciences University.

2017-18

Ph.D., Clinical Psychology, Carlos Albizu University, San Juan.

Ph.D., Clinical Psychology, Carlos Albizu University, San Juan.

Psy.D., Clinical Psychology, Ponce Health Sciences University.

Psy.D., Clinical Psychology, Ponce Health Sciences University.

2016-2017

Psy.D., Clinical Psychology, American School of Professional Psychology at Argosy University, Washington, DC

Ph.D., Clinical Psychology, Carlos Albizu University, San Juan.

Ph.D., Clinical Psychology, Carlos Albizu University, San Juan.

Psy.D., Clinical Psychology, John F. Kennedy University, Pleasant Hill, CA.

2015-2016

Ph.D., Clinical Psychology, Palo Alto University, Pacific Graduate School of Psychology.

Psy.D., Clinical Psychology, Carlos Albizu University, San Juan.

Ph.D., Clinical Psychology, Ponce Health Sciences University.

Ph.D., Clinical Psychology, Carlos Albizu University, San Juan.

2014-2015

Psy.D., Clinical Psychology, American School of Professional Psychology-Southern California at Argosy University, Orange County.

Psy.D., Clinical Psychology, Ponce Health Sciences University.

Psy.D., Clinical Psychology, Adler School of Professional Psychology- Chicago.

Psy.D., Clinical Psychology, The Florida School of Professional Psychology at Argosy University, Tampa

2013-2014

Psy.D., Clinical Psychology, Carlos Albizu University, Miami.

Psy.D., Clinical Psychology, Carlos Albizu University, San Juan.

Psy.D., Clinical Psychology, Pace University, NY.

2012-2013

Ph.D., Clinical Psychology, The New School, NY.

Psy.D., Clinical Psychology, Carlos Albizu University, Miami.

2011-2012

Ph.D., Clinical Psychology, Texas A&M University.

Psy.D., Clinical Psychology, Carlos Albizu University, San Juan.

Local Information

Puerto Rico is an island in the Caribbean approximately 100 miles long by 35 miles wide. Approximately 3.4 million people live in Puerto Rico. Puerto Rico, also known as the "Island of Enchantment," enjoys a temperate climate with average temperatures between 80°-85°F, although temperatures in the 90°'s are common during summertime.

Puerto Rico is composed of a very diverse influx and mix of cultures of primarily Spanish, African, and Taíno origin, but also including other European and Asian ancestors. Puerto Rico has been a part of the United States since 1898 and Puerto Ricans have been U.S. citizens since 1917.

The island is home to multicultural society and vibrant culture strongly maintaining its Latin-American roots, but also greatly influenced by our relationship with the US. Although Puerto Rico is an US territory,

people not familiar with the island considering to apply to our Program should expect a move here to feel like relocating to a different country.

Please visit the websites listed below to find more information about Puerto Rico*.

http://welcome.topuertorico.org/index.shtml

http://www.frommers.com/destinations/puertorico

Additional information regarding eligibility requirements (with hyperlinks) as provided by the VA Central Office, Office of Academic Affiliations.

- Trainees receive term employee appointments and must meet eligibility requirements for appointment
 as outlined in VA Handbook 5005 Staffing, Part II, Section B. Appointment Requirements and
 Determinations. https://www.va.gov/vapubs/viewPublication.asp?Pub ID=646&FType=2
- Selective Service website where the requirements, benefits and penalties of registering vs. not registering are outlined: https://www.sss.gov/Registration/Why-Register/Benefits-and-Penalties

Additional information specific suitability information from Title 5 (referenced in VHA Handbook 5005 – hyperlinks included):

(b) *Specific factors.* In determining whether a person is suitable for Federal employment, only the following factors will be considered a basis for finding a person unsuitable and taking a suitability action:

- (1) Misconduct or negligence in employment;
- (2) Criminal or dishonest conduct;
- (3) Material, intentional false statement, or deception or fraud in examination or appointment;
- (4) Refusal to furnish testimony as required by § 5.4 of this chapter;
- (5) Alcohol abuse, without evidence of substantial rehabilitation, of a nature and duration that suggests that the applicant or appointee would be prevented from performing the duties of the position in question, or would constitute a direct threat to the property or safety of the applicant or appointee or others:
- **(6)** Illegal use of narcotics, drugs, or other controlled substances without evidence of substantial rehabilitation:
- (7) Knowing and willful engagement in acts or activities designed to overthrow the U.S. Government by force; and
- (8) Any statutory or regulatory bar which prevents the lawful employment of the person involved in the position in question.
- **(c)** Additional considerations. OPM and agencies must consider any of the following additional considerations to the extent OPM or the relevant agency, in its sole discretion, deems any of them pertinent to the individual case:
 - (1) The nature of the position for which the person is applying or in which the person is employed;
 - (2) The nature and seriousness of the conduct;
 - (3) The circumstances surrounding the conduct;
 - (4) The recency of the conduct;
 - (5) The age of the person involved at the time of the conduct;
 - (6) Contributing societal conditions; and
 - (7) The absence or presence of rehabilitation or efforts toward rehabilitation.

Every attempt has been made to ensure the accuracy of the information contained in this brochure. Please be advised that errors and omissions may inadvertently occur or that new policies or program modifications may come into effect after publication. Any changes to the program will not affect the program's goals and objectives. Applicants interested in obtaining information about housing, cost of living, transportation, schools, and other aspects of Puerto Rico or desiring additional information about our program are encouraged to contact the Director of Training (787) 641-7582 Ext 12471.

^{*} Links will take you outside of the Department of Veterans Affairs Website. VA does not endorse and is not responsible for the content of the linked websites.